

G1-28515

8-30-07

Noel Philip spoke to
Pam Bartlett & she
agreed it should be
classified as "multiple
domestic" supply & to
go ahead & change the
application as such
for subsequent Public Notice.

Nancy Groves

Application says
municipal but
for only 7 homes,
contact applicant
before public notice

DD



State of Washington
Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use
Fee Paid _____
Date _____

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name **McLeod Water System** Home Tel: (____) ____ - ____
Mailing Address **c/o P. O. Box 1568** Work Tel: **(360) 629 - 8202**
City **Stanwood** State **WA** Zip+4 **98292-1568** FAX: **(360) 629-6064**

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☐ Same as above

Name **Pam Bartlett** Home Tel: (____) ____ - ____
Mailing **Address Same as above** Work Tel: **(360) 629 - 8202**
City _____ State _____ Zip+4 _____ + _____ FAX: (____) ____ - ____
Relationship to applicant **Office Manager**

Section 3. STATEMENT OF INTENT

multiple domestic
The applicant requests a permit to use not more than **18** (☒ gallons per minute or ☐ cubic feet per second)
from a ☐ surface water source or ☐ ground water source (check only one) for the purpose(s)
of **Municipal Supply**. ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See
instructions.) NOTE: A tax parcel number or a plat number is not sufficient.
Estimate a maximum annual quantity to be used in acre-feet per year: **2.1**

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:
From ____ / ____ / ____ to ____ / ____ / ____

Section 4. WATER SOURCE

If SURFACE WATER						If GROUNDWATER		
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:						A permit is desired for 1 well(s).		
Number of diversions: _____								
Source flows into (name of body of water):						Size & depth of well(s): 6"Ø, 341 ft..		
LOCATION								
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: 1,300 ft west, 1,040 feet north of the SE corner of Section 3								
¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
SE	SE	3	31 N	2 E	Island			
For Ecology Use Date Received: 8/24/07 Priority Date: 8/24/07								
SEPA: Exempt Not Exempt FERC License # _____ Dept. Of Health # _____								
Date Accepted As Complete 8/24/07 By OK Date Returned _____ By _____ WRIA: 6								

NW

Appl. No.: **61-28515**

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: *McLeod Water System*
- B. Briefly describe your proposed water system. (See instructions.)

The new system will consists 3,100 gallons of above ground storage in PE tanks, one well and pump house, all located on a Association owned easement. The distribution system consists of one pressure zone with a total of approximately 1,800 feet of 3-inch distribution mains.

- C. Do you already have any water rights or claims associated with this property or system? ☐ YES ☒ NO
PROVIDE DOCUMENTATION.

Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: 7 Type of connection *SF Residential*
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☒ NO
If yes, explain why you are unable to connect to the system. *Note: Regional water systems are identified by your County Health Department.*

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? *new Group B system* ☐ YES ☒ NO
If yes, when was it approved? Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☒ NO
If yes, when was it approved? Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: _____
- B. List total number of acres for other specified agricultural uses:
- | | |
|-----------|-------------|
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
- C. Total number of acres to be covered by this application: _____
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001)
Add up the acreage in which you have a controlling interest, including only:
‡ Acreage irrigated under water rights acquired after December 8, 1977;
‡ Acreage proposed to be irrigated under this application;
‡ Acreage proposed to be irrigated under other pending application(s).
- Is the combined acreage greater than 6000 acres? ☐ YES ☐ NO
 - Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO
If yes, enter permit no: _____
- E. Farm uses:
Stockwater - Total # of animals _____ Animal type _____ (If dairy cattle, see below)
Dairy - # Milking _____ # Non-milking _____

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☒ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

From the City of Stanwood, west on SR 532 approximately 4 miles to Cross Island Road, then right on Cross Island Road 3 miles to West Camano Drive, then left on West Camano Drive 2 miles to Sunset Drive, then right on Sunset Drive 1/4 mile to site.

Section 10. REQUIRED MAP

A. Attach a map of the project. **(See instructions.)**

Drawing "Water Distribution System, Comprehensive Map" attached

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

☐ YES ☒ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

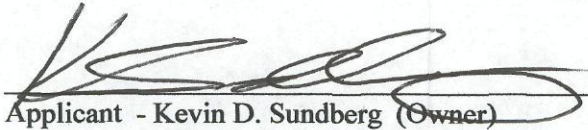
Service area of Association.

B. Does the applicant own the land on which the water source is located?

☒ YES ☐ NO

If no, submit a copy of agreement:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.


Applicant - Kevin D. Sundberg (Owner)

08/21/07

Date

NA

Landowner for place of use (if same as applicant, write "same")

Date

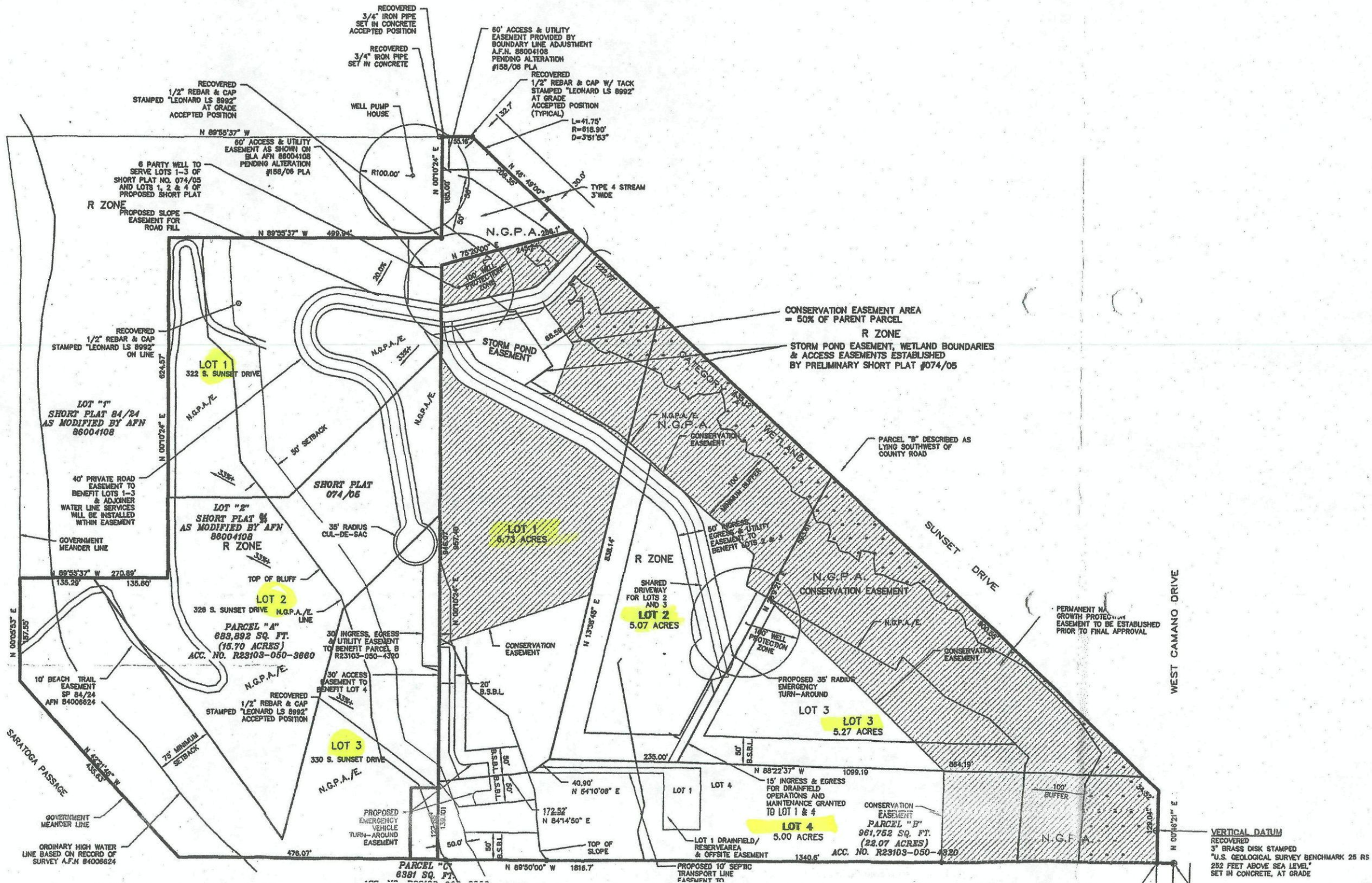
Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ (date).	

Ecology staff _____ Date _____

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).





SUNDBERG HOMES INC.

P.O. Box 1568 • Stanwood, WA 98292



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Cashiering Dept.
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Lacey, WA 98509-5128

985095128 8012

